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Application Number	10/561,732
Filing Date	January 26, 2008
First Named Inventor	Anthony Bruce Pike
Title	Medical Protection Sheeting
Art Unit	3772
Examiner Name	Keri Jessica Nelson
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

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Applicant/Inventor.

OR

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/26) submitted herewith or filed on _____.

SIGNATURE of Applicant or Assignee of Record

Signature		Date	July 12th, 2011
Name	Michael Clark	Telephone	+44(0)1908 551006
Title and Company	Director, APA Parafractions Limited		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 1 forms are submitted.

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